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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/659,684 09/10/2003 PAT 7,473,765 which is a CON of 10/295,723 11/15/2002 PAT 6,686,178  
which is a DIV of 09/923,246 08/03/2001 PAT 6,605,272  
which is a DIV of 09/522,217 03/09/2000 PAT 6,307,024  
which claims benefit of 60/123,547 03/09/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/14/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	WA	5	9	6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

10117

## TITLE

CYTOKINE ZALPHA11 LIGAND FUSION PROTEINS

FILING FEE RECEIVED 814	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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